

Public Notice

Notice is hereby given that the County of Webb is now accepting Request for Qualifications for Drug Rehabilitation Services including Counseling, Detox Treatment, and other Related Services.

Qualifications must be submitted in one (1) original and eight (8) copies in sealed envelopes to the Office of the Webb County Clerk.

Sealed envelopes must be marked with qualification number and title on front lower left-hand corner of envelope.

RFQ-2013-08 "Qualifications from Not for Profit Organizations for Drug Rehabilitation Services including Counseling, Detox Treatment, and other related services"

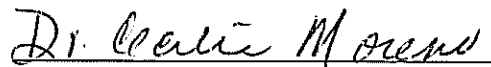
Qualifications will be either hand delivered or mailed to the following location:

**Webb County Clerk
Webb County Justice Center
1110 Victoria St., Suite 201
Laredo, Texas 78040**

Qualifications must be delivered no later than **Wednesday October 9, 2013, at 2:00 P.M.** at which time all qualifications received will be opened and read to the public. Late qualifications will not be considered.

If any additional information is requested please contact, Leticia Gutierrez at 956-523-4127. Please visit our Web-site for a copy of RFQ, under purchasing department www.webbcountytx.gov .

The County of Webb reserves the right to reject any and all qualifications or to select the qualified vendor that is in the best interest of Webb County.


Dr. Cecilia May Moreno
Purchasing Agent

Publication Dates:
September 24, 2013
September 30, 2013
October 5, 2013

THIS FORM MUST BE INCLUDED WITH RFQ-PACKAGE; PLEASE CHECK OFF EACH ITEM AND SIGN

“Sealed RFQ”

RFQ-2013-08 “Qualification from Not for Profit Organizations for Drug Rehabilitation Services including Counseling, Detox Treatment and other related services”

- ☐ Notice to Qualifier
- ☐ Qualifications (14 criteria) (required)
- ☐ Conflict of Interest Forms (required)
- ☐ Certification Regarding Debarment (Form H2048) (required)
- ☐ Certification Regarding Federal Lobbying (Form 2049) (required)
- ☐ Qualifier Information Form (required)
- ☐ Proof of No Delinquent Tax Owed to Webb County (required)
- ☐ References (required)

Signature

RFQ 2013-08 "Qualifications from Not-for Profit Organizations for Drug Rehabilitation Services including Counseling, Detox Treatment, and Other Related Services"

General Information

A. Scope

Webb County is seeking statements of qualifications from providers with which to contract for the purpose of prevention, intervention, and treatment of adults impacted by drugs. It is the intent of Webb County to contract with one (1) vendor for this service.

Interested parties are invited to submit a "Statement of Qualifications" expressing their interest in performing the services specified in this solicitation. The responses received will be evaluated and ranked. Webb County will enter into negotiations with the highest ranked respondent with the objective of entering into contract for services at a mutually agreeable cost.

B. Schedule of Events

Request for qualifications will be published in the newspaper September 23, 2013, September 30, 2013 and October 5, 2013.

Submit qualifications to County Clerk, Margie Ibarra, Webb County Clerk, Webb County Justice Center, 1110 Victoria Suite 201, Laredo, Texas 78040.

Due date; Wednesday October 9, 2013, at 2:00 P.M.

All questions prior to closing date should be directed to Dr. Cecilia Moreno, CTP, cmaymoreno@webbcountytx.gov; 956-523-4125 or Leticia Gutierrez, CTP, lgutierrez@webbcountytx.gov (956) 523-4127.

C. Selection

Webb County intends, but is not obligated to award a contract as a result of this solicitation. The evaluation criteria will be as follows:

1. Experience with prevention, intervention and treatment of persons impacted by drugs;
2. Experience with detox center services;
3. Experience with substance abuse and mental health counseling ;
4. Experience with crisis stabilization services for the homeless and critical medical care to persons affected by drugs;
5. Experience with hiring specialized, licensed staff to care for individuals with co-occurring disorders, including serious mental illness and addiction;

6. Nurses to work with clients with co-morbid disorders and chronic illnesses such as diabetes, hypertension, etc. and with the ability to find them a “medical home” and follow-up with primary health care;
7. Qualified clinicians who can provide assessment and treatment services that maximize high risk individual’s chances for recovery;
8. Crisis stabilization unit with medical personnel to provide critical care for 2-3 days and return patients home;
9. Coordinated transportation system;
10. Three references of others whom you have provided similar services to;
11. Facility arrangements;
12. Hours and appointment schedule;
13. Experience of the personnel to be used for this contract; and
14. Degrees, licenses, and certifications of personnel servicing the contract.

Simple well organized responses are strongly recommended. The response should include a detailed description of how the respondent is experienced and qualified to achieve the desired results. While there is no specific proposal format that must be followed, the responses shall be clear.

Webb County reserves the right to obtain clarification of any of the information provided in the response. Failure of a respondent to timely and sufficiently answer such a request for additional information or clarification may result in elimination from further consideration.

The response should have a clear section for each of the 14 criteria listed above.

All materials submitted in response to this solicitation become the property of Webb County and will not be returned to the respondent.

Webb County reserves the sole right to evaluate the statements and responses submitted, waive any irregularities therein, select and/or reject any and all responses.

Webb County staff will review and rank the submittals and may select top ranked firms to be invited for interviews and/or presentations, at no cost to the county.

After evaluating, ranking the submittals, and possibly holding interviews/presentations, Webb County anticipates negotiating a contract with the selected firm. If negotiations are unsuccessful, the County reserves the right to negotiate with the next highest ranking firm.

D. Term of the Contract

A contract will be executed as soon as possible after the Commissioners' Court makes the contract award and will commence immediately after. The contract will be for a period of 3 years with the option for up to three (3) one year renewals.

E. Payment

Invoices are to be submitted to the following address:

Webb County Purchasing Department
1110 Washington Suite 101
Laredo, Texas 78040

Accounts payable will make payment within thirty (30) days after receipt of an approved and correct invoice, as prescribed by Texas Local Government Code. Note: Failure to submit invoices to the above address will delay payment. DO NOT submit invoices to any other address for payment.

F. Validity of Response

The response submitted shall be valid for a period for up to ninety (90) days after the date of opening for negotiation, acceptance and award by the County.

Webb County

Conflict of Interest Disclosure

Effective January 1, 2006, Chapter 176 of the Texas Local Government Code requires that any vendor or person considering doing business with a local government entity disclose in the Questionnaire Form CIQ, the vendor or person's affiliation or business relationship that might cause a conflict of interest with a local government entity. By law, this questionnaire must be filed with the records administrator of Webb County no later than the 7th business day after the date the person becomes aware of facts that require the statement to be filed. See Section 176.006, Local Government Code. A person commits an offense if the person violates Section 176.006, Local Government Code. An offense under this section is a Class C misdemeanor. The questionnaire may be viewed and printed by following the link before:

By submitting a response to this request, the vendor represents that it is in compliance with the requirements of Chapter 176 of the Texas Local Government Code.

The Webb County Officials who come within Chapter 176 of the Local Government Code relating to filing of Conflict of Interest Questionnaire (Form CIQ) include:

1. Webb County Judge Danny Valdez
2. Commissioner Mike Montemayor
3. Commissioner Rosaura "Wawi" Tijerina
4. Commissioner John Galo
5. Commissioner Jaime Canales
6. Judge Joe Lopez, Chairman, 49th Judicial District
7. Judge Becky Palomo, 341st Judicial District
8. Judge Monica Notzon, 111th Judicial District

Please send completed forms to the Webb County Clerk's Office located at 1110 Victoria, Suite 201, Laredo, Texas 78040.

CONFLICT OF INTEREST QUESTIONNAIRE

FORM CIQ

For vendor or other person doing business with local governmental entity

This questionnaire reflects changes made to the law by H.B. 1491, 80th Leg., Regular Session. This questionnaire is being filed in accordance with Chapter 176, Local Government Code by a person who has a business relationship as defined by Section 176.001(1-a) with a local governmental entity and the person meets requirements under Section 176.006(a).

By law this questionnaire must be filed with the records administrator of the local governmental entity not later than the 7th business day after the date the person becomes aware of facts that require the statement to be filed. See Section 176.006, Local Government Code.

A person commits an offense if the person knowingly violates Section 176.006, Local Government Code. An offense under this section is a Class C misdemeanor.

OFFICE USE ONLY

Date Received

1 Name of person who has a business relationship with local governmental entity.

2 ☐ Check this box if you are filing an update to a previously filed questionnaire.

(The law requires that you file an updated completed questionnaire with the appropriate filing authority not later than the 7th business day after the date the originally filed questionnaire becomes incomplete or inaccurate.)

3 Name of local government officer with whom filer has employment or business relationship.

Name of Officer

This section (Item 3 including subparts A, B, C & D) must be completed for each officer with whom the filer has an employment or other business relationship as defined by Section 176.001(1-a), Local Government Code. Attach additional pages to this Form CIQ as necessary.

A. Is the local government officer named in this section receiving or likely to receive taxable income, other than investment income, from the filer of the questionnaire?

☐ Yes ☐ No

B. Is the filer of the questionnaire receiving or likely to receive taxable income, other than investment income, from or at the direction of the local government officer named in this section AND the taxable income is not received from the local governmental entity?

☐ Yes ☐ No

C. Is the filer of this questionnaire employed by a corporation or other business entity with respect to which the local government officer serves as an officer or director, or holds an ownership of 10 percent or more?

☐ Yes ☐ No

D. Describe each employment or business relationship with the local government officer named in this section.

4

Signature of person doing business with the governmental entity

Date

Adopted 06/29/2007

CERTIFICATION
REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY
EXCLUSION FOR COVERED CONTRACTS

PART A.

Federal Executive Orders 12549 and 12689 require the Texas Department of Agriculture (TDA) to screen each covered potential contractor to determine whether each has a right to obtain a contract in accordance with federal regulations on debarment, suspension, ineligibility, and voluntary exclusion. Each covered contractor must also screen each of its covered subcontractors.

In this certification "contractor" refers to both contractor and subcontractor; "contract" refers to both contract and subcontract.

By signing and submitting this certification the potential contractor accepts the following terms:

1. The certification herein below is a material representation of fact upon which reliance was placed when this contract was entered into. If it is later determined that the potential contractor knowingly rendered an erroneous certification, in addition to other remedies available to the federal government, the Department of Health and Human Services, United States Department of Agriculture or other federal department or agency, or the TDA may pursue available remedies, including suspension and/or debarment.
2. The potential contractor will provide immediate written notice to the person to which this certification is submitted if at any time the potential contractor learns that the certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
3. The words "covered contract", "debarred", "suspended", "ineligible", "participant", "person", "principal", "proposal", and "voluntarily excluded", as used in this certification have meanings based upon materials in the Definitions and Coverage sections of federal rules implementing Executive Order 12549. Usage is as defined in the attachment.
4. The potential contractor agrees by submitting this certification that, should the proposed covered contract be entered into, it will not knowingly enter into any subcontract with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the Department of Health and Human Services, United States Department of Agriculture or other federal department or agency, and/or the TDA, as applicable.

Do you have or do you anticipate having subcontractors under this proposed contract?

☐ Yes

☐ No

5. The potential contractor further agrees by submitting this certification that it will include this certification titled "Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion for Covered Contracts" without modification, in all covered subcontracts and in solicitations for all covered subcontracts.
6. A contractor may rely upon a certification of a potential subcontractor that it is not debarred, suspended, ineligible, or voluntarily excluded from the covered contract, unless it knows that the certification is erroneous. A contractor must, at a minimum, obtain certifications from its covered subcontractors upon each subcontract's initiation and upon each renewal.
7. Nothing contained in all the foregoing will be construed to require establishment of a system of records in order to render in good faith the certification required by this certification document. The knowledge and information of a contractor is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
8. Except for contracts authorized under paragraph 4 of these terms, if a contractor in a covered contract knowingly enters into a covered subcontract with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the federal government, Department of Health and Human Services, United States Department of Agriculture, or other federal department or agency, as applicable, and/or the TDA may pursue available remedies, including suspension and/or debarment.

PART B. CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSION FOR COVERED CONTRACTS

Indicate in the appropriate box which statement applies to the covered potential contractor:

- ☐ The potential contractor certifies, by submission of this certification, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this contract by any federal department or agency or by the State of Texas.
- ☐ The potential contractor is unable to certify to one or more of the terms in this certification. In this instance, the potential contractor must attach an explanation for each of the above terms to which he is unable to make certification. Attach the explanation(s) to this certification.

Name of Contractor	Vendor ID No. or Social Security No.	Program No.
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Signature of Authorized Representative

Date

Printed/Typed Name and Title of
Authorized Representative

CERTIFICATION REGARDING FEDERAL LOBBYING
(Certification for Contracts, Grants, Loans, and Cooperative Agreements)

PART A. PREAMBLE

Federal legislation, Section 319 of Public Law 101-121 generally prohibits entities from using federally appropriated funds to lobby the executive or legislative branches of the federal government. Section 319 specifically requires disclosure of certain lobbying activities. A federal government-wide rule, "New Restrictions on Lobbying", published in the Federal Register, February 26, 1990, requires certification and disclosure in specific instances.

PART B. CERTIFICATION

This certification applies only to the instant federal action for which the certification is being obtained and is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$100,000 for each such failure.

The undersigned certifies, to the best of his or her knowledge and belief, that:

1. No federally appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with the awarding of any federal contract, the making of any federal grant, the making of any federal loan, the entering into of any cooperative agreement, or the extension, continuation, renewal, amendment, or modification of any federal contract, grant, loan, or cooperative agreement.
2. If any funds other than federally appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with these federally funded contract, subcontract, subgrant, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying", in accordance with its instructions. (If needed, contact the Texas Department of Agriculture to obtain a copy of Standard Form-LLL.)

3. The undersigned shall require that the language of this certification be included in the award documents for all covered subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all covered subrecipients will certify and disclose accordingly.

Do you have or do you anticipate having covered subawards under this transaction?

- ☐ Yes
☐ No

Name of Contractor/Potential Contractor	Vendor ID No. or Social Security No.	Program No.
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Name of Authorized Representative	Title
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Signature – Authorized Representative

Date

Qualifier Information

Name of Qualifier: _____

Address: _____

Phone: _____

Email Address: _____

Signature of Person Authorized to Sign RFQ:

Signature

Print Name

Title

Indicate status as to "Partnership", "Corporation", "Land Owner", etc.

(Date)

Note:

All submissions relative to these Request for Qualifications shall become the property of Webb County and are nonreturnable.

If any further information is required please call the Webb County Purchasing Agent, Dr. Cecilia May Moreno, at (956)523-4125 or Administrative Assistant, Leticia Gutierrez, at (956)-523-4127.

PROOF OF NO DELINQUENT TAXES OWED TO WEBB COUNTY

Name _____ owes no delinquent property taxes to Webb County.

_____ owes no property taxes as a **business** in Webb County.
(Business Name)

_____ owes no property taxes as a **resident** of Webb County.
(Business Owner)

Person who can attest to the above information

*** SIGNED NOTORIZED DOCUMENT AND PROOF OF NO DELINQUENT TAXES TO WEBB COUNTY.**

The State of Texas

County of Webb

Before me, a Notary Public, on this day personally appeared _____, know to me (or proved to me on the oath of _____ to be the person whose name is subscribed to the forgoing instrument and acknowledged to me that he executed the same for the purpose and consideration therein expressed.

Given under my hand and seal of office this ____ day of _____ 2013.

Notary Public, State of Texas

(Print name of Notary Public here)

My commission expires the ____ day of _____ 20__.

References

Name of Firm	Address	Phone	Name of Contact